

File Original and First Copy with
Department of Ecology

Second Copy—Owner's Copy

Third Copy—Driller's Copy

WATER WELL REPORT

STATE OF WASHINGTON

Water Right Permit No. _____

Start Card No. 027875(1) OWNER: Name MEL SIMMONS Address 6553 S. CONRAD, CLINTON 98236(2) LOCATION OF WELL: County ISLAND NW 4 SW 4 Sec. 26 T. 29 N. R. 3E W.M.(2a) STREET ADDRESS OF WELL (or nearest address) W. DEER LK RD CLINTON 98236(3) PROPOSED USE: ☒ Domestic ☐ Industrial ☐ Municipal ☐
☐ Irrigation ☐ Test Well ☐ Other ☐
☐ DeWater(4) TYPE OF WORK: Owner's number of well (if more than one) 1Abandoned ☐ New well ☒ Method: Dug ☐ Bored ☐
Deepened ☒ Cable ☒ Driven ☐
Reconditioned ☐ Rotary ☐ Jetted ☐(5) DIMENSIONS: Diameter of well 6 inches.Drilled 150 feet. Depth of completed well 150 ft.

(6) CONSTRUCTION DETAILS:

Casing installed: 6 " Diam. from 0 ft. to 140 ft.Welded ☒ " Diam. from _____ ft. to _____ ft.Liner installed ☐ " Diam. from _____ ft. to _____ ft.Threaded ☐ " Diam. from _____ ft. to _____ ft.Perforations: Yes ☐ No ☒

Type of perforator used _____

SIZE of perforations _____ in. by _____ in.

_____ perforations from _____ ft. to _____ ft.

_____ perforations from _____ ft. to _____ ft.

_____ perforations from _____ ft. to _____ ft.

Screens: Yes ☒ No ☐Manufacturer's Name JohnsonType welded STAINLESS Model No. _____Diam. 6 Slot size 16 from 140 ft. to 145 ft.Diam. 6 Slot size 20 from 145 ft. to 150 ft.Gravel packed: Yes ☐ No ☒ Size of gravel _____

Gravel placed from _____ ft. to _____ ft.

Surface seal: Yes ☒ No ☐ To what depth? 18 + ft.Material used in seal BENTONITEDid any strata contain unusable water? Yes ☐ No ☒

Type of water? _____ Depth of strata _____

Method of sealing strata off _____

(7) PUMP: Manufacturer's Name _____

Type: Sub H.P. _____(8) WATER LEVELS: Land-surface elevation above mean sea level 220 ft.Static level 125 ft. below top of well Date MAR 89

Artesian pressure _____ lbs. per square inch Date _____

Artesian water is controlled by _____ (Cap. valve, etc.)

(9) WELL TESTS: Drawdown is amount water level is lowered below static level

Was a pump test made? Yes ☐ No ☒ If yes, by whom? _____

Yield _____ gal./min. with _____ ft. drawdown after _____ hrs.

" " " " " "

" " " " " "

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)

Time Water Level Time Water Level Time Water Level

Date of test _____

Bailer test 20 gal./min. with 10- ft. drawdown after 4 hrs.

Airstest _____ gal./min. with stem set at _____ ft. for _____ hrs.

Artesian flow _____ g.p.m. Date _____

Temperature of water _____ Was a chemical analysis made? Yes ☐ No ☒

(10) WELL LOG or ABANDONMENT PROCEDURE DESCRIPTION

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of information.

MATERIAL	FROM	TO
SAND	0	3
HARD PAN	3	55
SAND	55	87
CLAY	87	125
WATER SAND (mix)	125	150

RECEIVED

MAR 14 1989

DEPARTMENT OF ECOLOGY
NORTHWEST REGIONWork started MAY, 19. Completed MAR, 19 89**WELL CONSTRUCTOR CERTIFICATION:**

I constructed and/or accept responsibility for construction of this well, and its compliance with all Washington well construction standards. Materials used and the information reported above are true to my best knowledge and belief.

NAME WHIOBEY DRILLERS
(PERSON, FIRM, OR CORPORATION) (TYPE OR PRINT)Address PAK HARBOR(Signed) Rennis Fisher License No. 129
(WELL DRILLER)Contractor's
Registration
No. WHDW 289 MM Date MAR, 19 89

(USE ADDITIONAL SHEETS IF NECESSARY)



WASHINGTON STATE
DEPARTMENT OF
ECOLOGY

Well Tagging Form

Unique Well Tag No: AKY708

RECORD VERIFICATION (check ☒ one)

- ☒ Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you)
- ☐ Verification inconclusive
- ☐ Well Report not available

WELL OWNERSHIP IF DIFFERENT FROM WELL REPORT

Name: West Deer Lake #1

RECEIVED

Street Address: 6553 S. CONRAN ST.

MAR 28 2007

City: CLINTON

State: WA

DEPT. OF ECOLOGY

WELL LOCATION IF DIFFERENT FROM WELL REPORT

Well Address: 6604 Wintergreen Dr/R32926-273-0990

City: Clinton

County: Island

T. 29N

R. 03E W.M.

Sec. 26

NW 1/4 of the SW 1/4

FOR AGENCY USE ONLY

Latitude: 47 58.24673

Longitude: 122 23.64303

Elevation at land surface 406 feet / meters (circle one)

- ☒ GPS
- ☐ Topographic Map
- ☐ Survey
- ☐ Computer generated

☐ Digital Altimeter

☐ Topographic Map

☒ Other: Computer Generated from
DEM and GPS XY Coordinates

Additional Information, if available:

☐ Location marked on topographic map (please attach)

☐ Location marked on air photo (please attach)

Tag placed and well
GPS'd by:



FOR AGENCY USE ONLY

WELL CHARACTERISTICS

Physical Description of well (size of casing, type of well, housing, etc.)

Pumphouse Is Behind Shop At Top of Hill.

Location of Well Identification Tag:

Was supplemental tag needed for easy of identifying well?

☐

Yes

☒

No

If yes, where was tag placed?

D	C	B	A
E	F	G	H
M	L	K	J
N	P	Q	R

SECTION: 29N/03E-26

COMMENTS:

FOR ECOLOGY WATER RESOURCES PROGRAM ONLY

Water Right #

Date Issued:

Circle One:

Application

Permit

Certificate

Claim

Exempt

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Manufacturer's Name Johnson
Type welded STAINLESS Model No. _____
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NAME WHIOBEY DRILLERS
(PERSON, FIRM, OR CORPORATION) (TYPE OR PRINT)

Address OAK HARBOR

(Signed) Rennie Fisher License No. 129
(WELL DRILLER)

Contractor's Registration No. WHDDWP 289 MM Date MAR, 1989

(USE ADDITIONAL SHEETS IF NECESSARY)